PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003												nber	
CLAIMS AS FILED - PART I									1	8, 1			
(Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER SMALL		
TOTAL CLAIMS 14								RATE	FEE	7	RATE	FEE	
FC	PR		NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	4 minus 20=		· 6			X\$ 9=	:	OR	X\$18=		
IND	EPENDENT C	LAIMS			. 0			X43=	1	OR	X86=		
ΜU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT	. /						1	000		
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=		OR	+290=		
6-3-05 CLAIMS AS AMENDED - PART II								TOTAL	·	OR	TOTAL	7:70	
(Column 1) (Column 2) (Column 3)								SMAL	L ENTITY	OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING	1	HIGH	EST	PRESENT	lſ	D.***	ADDI-		RATE	ADDI-	
		AFTER AMENDMENT		PREVIO		EXTRA		RATE	TIONAL FEE			TIONAL FEE	
	Total	· /Y	Minus	· 2	Ó	=		X80=		OR	_50 X \$18 ≘		
	Independent	* 2	Minus	*** (3	= —		X43=		OR	X 00=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							180 +145=		OR	36° + 290 =		
1,7								TOTA	L		TOTAL		
(Column 1) (Column 2) (Column 3)								ADDIT. FEE ADDIT. FEE					
AMENDMENT B		. CLAIMS HIGH		EST	T			ADDI-) [ADDI-		
		AFTER AMENDMENT		PREVIO		EXTRA	H	RATE	TIONAL FEE	1	RATE	TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	. AAA		-		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								.145-		1 1	.200-		
								+145=		OR	+290= TOTAL		
•								DDIT. FEI		OR ,	ADDIT. FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								1 .55				
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
MEN	Independent	*	Minus	***.		=	┞	X43=	 		X86=		
٩	FIRST PRESE	-	740=		OR	- X00=							
• 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
· •• (**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								·	OR ,	TOTAL ODIT. FEE		
		ber Previously Paid					r foun	d in the a	ppropriate bo	x in colu	ımn 1.		